



QUESTIONS FOR MEDICAL EXAMINING BOARD NOMINEE - PHYSICIAN MEMBER

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CONNECTICUT MEDICAL EXAMINING BOARD ([CGS § 20-8A](#))

The Medical Examining Board is within the Department of Public Health (DPH). By law, it must (1) hear and decide matters concerning suspension or revocation of a practitioner's license, (2) adjudicate complaints against practitioners, and (3) impose sanctions where appropriate. The board must refer all statements of charges filed with the board by DPH to a medical hearing panel within 60 days of receiving the charges. The board reviews a panel's proposed final decision and may adopt or modify the decision or remand it to the panel for further review or the taking of additional evidence.

NOMINEE QUESTIONS

1. What do you consider the board's primary role and function? Is its primary responsibility to the medical community or health care consumers?
2. In 2012, the board expanded from 15 to 21 members to include public members and representatives of certain medical specialties. How have these changes affected the board's ability to meet its statutory duties? Have they changed the board's culture? Have they improved the board's decision making process?
3. The medical board has been publicly criticized for failing to discipline physicians in a timely and appropriate manner. Has increasing the board's membership impacted the length of the disciplinary process?
4. Current law allows the DPH commissioner to waive up to 10 contact hours of continuing medical education for a physician who (a) serves on the board or a medical hearing panel or (b) helps DPH with its duties to its professional boards and commissions. Can you think of other ways to encourage physicians to engage in such service?

5. Connecticut is one of only a few states that does not have an independent medical board. Do you think the board as currently structured, funded, and administered, is appropriate and allows it to successfully meet its statutory duties?
6. How do you view the relationship between the board and DPH?
7. Historically, Connecticut has ranked lower than most other states in its rate of physician discipline. How do you react to this? What steps should the board take to improve its ranking?
8. What are your views on the program that allows physicians, with the consent of DPH, to participate in appropriate rehabilitation programs?
9. How does your practice or institution address complaints related to the performance and possible discipline of a physician?
10. What is your opinion on the practice of prescribing medicine using telemedicine technologies? Do you think there's a future for telemedicine in Connecticut?
11. The Department of Public Health recorded 534 adverse events in hospitals and ambulatory surgical centers in 2013, more than twice as high as in any of the previous eight years. What is the board's role in reducing medical errors and adverse events? How can health information technology help in this regard?

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